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Facsimile Coversheet

To: Commissioner for Patents **Date:** October 2, 2006
Fax: 571 273 8300 **Page** 18, including this cover sheet
From: Valentina Papraniku
Paralegal
Re: AMENDMENT
U.S. Patent Application No.: 10/650,459
For: A METHOD OF FABRICATING A GRADED
INDEX PLASTICS MATERIAL OPTICAL...
Our Ref. No.: 979-032

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PTO/SB/97 (09-04)

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Amendment

Amendment Transmittal

Petition for One-Month extension

Request for Continued-Examination (RCE)

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENTDocket No. 979-032RECEIVED
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Applicant(s) : Fournier et al. Group Art Unit: 1732
 Serial No. : 10/650,459 Examiner: Mathieu D. Vargot
 Filed : August 27, 2003
 For : A METHOD OF FABRICATING A GRADED INDEX...

AMENDMENT FEE TRANSMITTALVia Facsimile 571-273-8300

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

- ☐ No additional fee is required.
- ☐ The additional fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining After Amendment		Highest No. Covered by Previous Payments	Present Extra	Rate	Additional Fee
Total Claims*	12	-	20	=0	x \$50.00	\$ _____
Independent Claims	1	-	3	=0	x \$200.00	\$ _____
Multiple Dependent Claim(s)	(If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$260.00 to additional fee.)					\$ _____
	Total:					\$ _____
<input type="checkbox"/>	Verified Statement of "Small Entity" Status Under 37 CFR § 1.27 filed _____. Reduced Fees Under 37 CFR § 1.9(f) (50% of total) paid herewith.					\$ _____
<input type="checkbox"/>	Charge fee to Deposit Account No. 19-2825 . Order No. _____					

* Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. § 1.75(c).

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A DUPLICATE COPY OF THIS SHEET IS ATTACHED.

- ☒ [X] The Commissioner is hereby authorized to charge any additional fees which may be required for this amendment, or credit any overpayment to Deposit Account No. 19-2825. Order No. 979-032.
A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
- ☐ [] ___ Page(s) of substitute Sequence Listing
- ☐ [] ___ Computer disk(s) containing substitute Sequence Listing
- ☐ [] Statement under 37 C.F.R. § 1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.
- ☐ [] A check in the amount of \$___ to cover the filing fee is attached.

Respectfully submitted,

SOFER & HAROUN L.L.P.

Dated: October 2, 2006

By: _____

Joseph Sofer

Registration No. 34,438

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